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UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director
Assistance to the Governments of the English- and Dutch-Speaking Caribbean Countries

Proposed UNFPA assistance: $5 million, $4 million from regular resources and $1 million from multi-bilateral and/or other, including regular, resources

Programme period: 4 years (1997-2000)

Cycle of assistance: Second

Category per decision 96/15: Not applicable

Proposed assistance by core programme areas (in millions of $):

	Regular resources	Other	*Total*
Reproductive health	2.7	.8	3.5
Population & development strategies	.5	.1	.6
Advocacy	.8	.1	.9
Total	4.0	1.0	5.0

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1. The United Nations Population Fund (UNFPA) proposes to support a programme of assistance to English- and Dutch-speaking countries[1] in the Caribbean region within a regional framework over the four-year period 1997-2000. UNFPA proposes to fund the programme in the amount of $5 million, of which $4 million would be programmed from UNFPA's regular resources to the extent such resources are available. UNFPA would seek to provide the balance of $1 million from multi-bilateral and/or other, including regular, resources to the extent possible, consistent with Executive Board decision 96/15 on the allocation of UNFPA resources. This amount includes commitments from the Government of the Netherlands for activities in Suriname. This will be UNFPA's second programme of assistance to the region.

2. The new programme reflects regional priorities in the population sector as they have been consistently stated by the Governments of the Caribbean countries throughout the process leading up to and following the 1994 International Conference on Population and Development (ICPD). These priorities were articulated most recently at a regional meeting of representatives of governmental and non-governmental organizations (NGOs) in May 1995 that produced the Caribbean Post-ICPD Plan of Action. These priorities were reaffirmed by government and NGO partners at a UNFPA-organized meeting in March 1996 prior to the programme review and strategy development (PRSD) mission that was fielded to the region and again at a PRSD debriefing meeting with all relevant partners in November 1996. The proposed programme has been harmonized with the programming cycles of UNICEF and UNDP.

3. The primary objective of the proposed programme is to promote a comprehensive approach to reproductive health and reproductive rights with a focus on adolescents and youth, as well as to incorporate population factors into socio-economic development and poverty eradication programmes, including the mainstreaming of gender concerns. By the year 2000, the programme aims to have contributed to the removal of existing barriers to the provision of reproductive health services for adolescents and youth in countries of the region.

4. All the activities under the proposed programme, as in all UNFPA-assisted activities, would be undertaken in accordance with the principles and objectives of the ICPD Programme of Action, which was endorsed by the General Assembly through its resolution 49/128.

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[1]Countries and territories covered under this programme are: Anguilla, Antigua and Barbuda, Aruba, the Bahamas, Barbados, Bermuda, British Virgin Islands, Cayman Islands, Dominica, Grenada, Guyana, Jamaica, Montserrat, the Netherlands Antilles, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, Trinidad and Tobago, and Turks and Caicos.

Background

5. The Caribbean region is made up of a number of countries that exhibit great diversity in terms of population size, ethnic composition, geography and levels of socio-economic development. There are widespread areas of poverty: for example, half of the population of Suriname, Guyana and Jamaica live in absolute poverty, and for indigenous populations in Guyana and Suriname this figure is much higher, reaching 85 per cent. Most Caribbean nations fall within category "B" and some in category "C" under UNFPA's new approach for resource allocation.

6. In terms of population concerns, the countries do share certain priority interests, especially those concerning women and youth. The status of women in the region is not as good as is often assumed. An estimated average of 40 per cent of the region's households are headed by women, and these are the ones disproportionately affected by poverty. In Guyana, for example, 71 per cent of the female-headed households face critical poverty levels. Overall unemployment rates are about 30 per cent higher for women than for men. In most Caribbean countries, about a third of the population is below age 15, and 20 per cent are in the 15-24 age group. An estimated 50 per cent of adolescents are out of school by age 15 or 16 without employable skills and lack prospects of finding full-time employment. Despite nearly universal knowledge about contraceptive methods, young people continue to engage in unprotected sexual behaviour. Adolescent reproductive health access is limited due to existing legal and cultural barriers, including requirements of parental consent. In Guyana and Jamaica, two of the three countries where UNFPA proposes to undertake pilot youth-focused reproductive health care activities, adolescent pregnancy rates are above the 20 per cent level.

7. Family planning services are available throughout the region, and 98-100 per cent of deliveries occur in hospitals. However, reproductive health services follow a traditionally vertical and fragmented approach with little integration. Contraceptive use is generally high, averaging about 60 per cent among women in union, with the exception of Guyana and Suriname where it is less than 50 per cent. The most preferred method of contraception among women in union is the pill, followed by condoms and tubal sterilization. Data indicate that congenital syphilis has increased significantly, and some countries have reported that 2 to 3 per cent of women attending antenatal clinics are HIV-positive. HIV/AIDS is the leading cause of death among women 15 to 44, and the second leading cause of death for young adults. In Jamaica and Bahamas, HIV infection is estimated at 4-6 per cent and 8 per cent, respectively, with heterosexual contact being the primary mode of transmission, as it is throughout the region.

Previous UNFPA assistance

8. UNFPA was involved in a number of successful activities in the Caribbean during the previous cycle of assistance. In collaboration with UNICEF and the Netherlands, UNFPA supported the teenage mothers programme at the Women's Centre of Jamaica Foundation, an NGO that has high success rates in avoiding second pregnancies among adolescent girls, returning girls to school and helping them secure jobs, and the Fund will provide support for this concept. Several information, education and communication (IEC) projects have also been supported at the national level, focusing on reproductive health and family life education, with women and adolescents as target groups. UNFPA gained considerable recognition and credibility through its support during preparations for the ICPD and helped consolidate an important coalition of public and NGO partners. These partnerships will be further cultivated to promote ICPD goals during the next programme period.

9. The main lesson learned from previous UNFPA assistance has been that a programmatic approach is essential for successful implementation and impact of activities, rather than a series of uncoordinated activities lacking strategic vision. Even in countries where considerable gains in contraceptive use were evident, such as Jamaica, the lack of baseline data does not allow for precise conclusions on the relative contribution of UNFPA to these achievements. The PRSD mission found that project formulation, monitoring and evaluation were areas that needed to be strengthened, including those concerned with gender mainstreaming. The narrow scope of population activities and the weak attention paid to balancing gender concerns were reflected in the fact that little or no effort was made to provide men with reproductive health information. Findings also indicate that the design of projects for youth and adolescents needed to be improved in order to focus on youth participatory methodologies and to carry out research for audience segmentation and message development. IEC efforts also need to be linked with service provision for youth, including innovative strategies to reach out-of-school adolescents. Adolescent IEC activities are recognized as being crucial in the region, and they are being supported by different donors. However, these activities have often lacked direction and coordination and have sometimes duplicated each other.

10. The Eastern Caribbean countries that started formulating population policies in the second half of the 1980s have not been able to complete the process. Overall, efforts to set up population units in countries with small policy-making bureaucracies were ineffective in light of the limited resources and of competing priorities. UNFPA's past assistance was not able to foster lasting conceptual linkages among policy makers of the relevance of population and reproductive health issues to poverty eradication, youth development and gender equality. In order to enhance national self-reliance and capacity-building, UNFPA has changed its executing modalities to rely much more on direct execution by Governments and NGOs rather than United Nations agencies.

Although well received and holding promise for the future, this has inevitably led to difficulties due to the weak technical and management capacities of many of the Caribbean countries.

Other external assistance

11. Despite a declining trend in donor assistance to the Caribbean region, there is still a significant contribution from bilateral programmes, although these are generally limited to specific programme areas. The United States Agency for International Development (USAID) is now sponsoring a youth-focused programme in Jamaica designed to reach out-of-school adolescents with a package of family planning, reproductive health, literacy and basic skills training. The German Gesellschaft für Technische Zusammenarbeit (GTZ) also provides assistance to Jamaica, including support for training health personnel at the University of the West Indies at Mona as well as for HIV/AIDS education and prevention activities. The European Union is assisting with health infrastructure development in St. Kitts and Nevis, St. Lucia, and St. Vincent and the Grenadines. Other important partners include UNDP, UNICEF, the World Food Programme (WFP) and the Pan-American Health Organization (PAHO), all of whose programmes have components for collaborative linkages with respect to social mobilization activities, eradication of violence against children and women, health delivery, family life education, HIV/AIDS education and prevention, and male responsibility issues.

12. UNFPA's niche and comparative advantage include 20 years of working on population issues in the region, its access to a solid network of governmental and NGO partners committed to the ICPD Programme of Action, and its experience in the area of adolescent and youth sexual and reproductive health issues. UNFPA enjoys the goodwill and credibility of programme partners throughout the region. Advocacy and social mobilization on reproductive rights, gender sensitivity and male participation are overarching issues throughout the programme, and these are also areas in which UNFPA has a strong mandate.

Proposed programme

13. To focus assistance and maximize programme impact, three countries -- Guyana, Jamaica and Suriname -- are proposed as the main recipients of UNFPA country-level assistance, based on such criteria as poverty levels, the needs of young people and existing gender inequalities. The proposed programme's overall strategic vision in the Caribbean region is to focus on adolescents and youth since they constitute not only a majority of the population but also a vulnerable group that often has difficulty in obtaining reproductive health services. UNFPA's strategy is to demonstrate the feasibility of an integrated minimum package of reproductive and sexual health care services for youth based on linking existing national services and resources. It will also aim at capacity-building to enable Governments and NGOs to incorporate population, youth, gender

and reproductive health issues into national programmes, especially those related to poverty eradication. Advocacy activities are aimed at raising awareness for attitudinal and policy changes in favour of providing an environment that will enable youth to obtain access to services. In those countries with significant indigenous populations, programme partners will be encouraged to extend coverage of IEC and service activities to them, particularly in preventing sexually transmitted diseases (STDs), including HIV/AIDS.

14. Reproductive health. UNFPA will assist the countries to promote an eventual regional agreement in collaboration with the Caribbean Common Market (CARICOM) on setting up a minimum package of integrated sexual and reproductive health services for adolescents and youth in support of pilot activities in Jamaica, Suriname and Guyana. The pilot package will include delivery of family planning IEC and services; education on STDs, including HIV/AIDS; post-abortion counselling; and referral systems for cases of violence against women and children. The programme's experience and results with adolescent and youth services will be disseminated throughout the region through CARICOM and other regional organizations. In collaboration with the Economic Commission on Latin American and the Caribbean (ECLAC), and as a component of the pilot activities, a database on reproductive health and youth-related issues will be developed that is gender sensitive and is disaggregated by age, sex, ethnicity and socio-economic group. UNFPA will also support regional training for health providers concerned with youth reproductive health that will focus on improving adolescent counselling skills, including sensitivity to gender concerns.

15. The proposed programme will also support established regional family planning associations and NGOs in developing gender-sensitive prototype IEC materials addressing the choices faced by adolescents and young men and women. These IEC materials will answer, in simple, non-technical language, questions about contraceptives and their side effects; STDs, including HIV/AIDS; and other selected issues related to sexual and reproductive health. Existing peer-to-peer education activities will be redesigned in a manner that will enhance coverage to an increasingly large group of out-of-school youth. UNFPA will also support innovative outreach work and/or IEC efforts that include infomercials to reach this priority target group. UNFPA will participate in and provide technical support to the multi-agency effort with PAHO and UNICEF to develop a regional health and family life education curriculum that incorporates adolescent sexuality, reproductive health and gender issues.

16. Population and development strategies. The new programme, in collaboration with ECLAC and the University of the West Indies, will provide training on population and development issues for key personnel in government ministries and in NGOs and will organize relevant seminars and workshops for policy makers. Research studies already being carried out on the subject of adolescent pregnancies and on migration will be completed. To improve data availability,

UNFPA will support the use of and training in mapping technology at the National Statistical Offices in Jamaica and in Trinidad and Tobago with a view to preparing for the censuses to be carried out in the year 2000. UNFPA will also support ECLAC in transforming the data sets from the 1991 census into ECLAC's computer software format. The programme will support limited comparative research on adolescent reproductive service preferences and rights, male socialization and responsibility and on violence against women in order to promote awareness of gender equality issues and on the interrelationship of population and poverty eradication efforts. This research will be carried out in collaboration with regional women's organizations, universities and private sector research groups. UNFPA also will provide technical support to the Organization of Eastern Caribbean States and CARICOM to incorporate youth and gender components in planned regional socio-economic and household surveys and policy documents dealing with regional social development.

17. Advocacy. Advocacy activities in the proposed programme would be designed to support Governments and NGO partners in their efforts to increase awareness of population and reproductive health issues, particularly as they relate to adolescents and youth, and would be implemented in collaboration with women's groups, NGOs and with UNIFEM and its network of partners in the region as well as in linkage with related programmes of other United Nations agencies. Activities will cover gender issues, including male participation and responsibility, eradication of violence against women and children, and the attitudinal and policy changes needed to facilitate continuation of education and skills training for pregnant adolescents. More use will be made of the United Nations Information Centre (UNIC) to promote the work of national programme partners in the area of reproductive rights, gender equity and equality, and access to reproductive health services, especially for youth and marginalized groups, including indigenous peoples. In addition, the programme will support ICPD monitoring activities by selected NGOs to document follow-up activities at regional or national levels.

Implementation, monitoring, evaluation and coordination

18. The development of projects within the proposed programme will be undertaken in a workshop setting involving both the implementing agencies and representatives of programme beneficiaries, including youth groups. The activity design and implementation stages will also be used for training of partners in project design, monitoring and evaluation methodologies, impact assessment, programme management, including accountability issues, gender mainstreaming and gender impact assessment. In line with UNFPA guidelines, programme indicators will be developed as well as quantitative and qualitative project indicators for monitoring and impact evaluation. A regional roster of expertise would be completed early in the new cycle and used to identify experts for programme development, short-term advisory support as well as for programme evaluation. The utilization of experts from the region would be supplemented by

UNFPA's Country Support Team for Latin America and the Caribbean and, with respect to gender issues, the technical inputs from UNIFEM and the Gender Units at the University of the West Indies.

19. To strengthen programme management, UNFPA will work closely with its governmental and non-governmental partners and assist them in training staff as necessary. UNFPA will continue its pro-active role in coordinating international assistance in population-related activities, working within the region. Quarterly and annual programme and financial reporting requirements will be carried out according to standard UNFPA guidelines. Each thematic area will have annual tripartite reviews to examine annual reports and future workplans. A mid-term review of achievements and constraints will be undertaken at the beginning of 1999.

Recommendation

20. The Executive Director recommends that the Executive Board approve the proposed programme of assistance to countries of the English- and Dutch-speaking Caribbean region as presented, subject to the availability of resources, in the amount of $5 million, $4 million of which would be programmed from UNFPA's regular resources, to the extent such resources are available, and the balance of $1 million would be sought from multi-bilateral and/or other, including regular, resources to the extent possible, consistent with the Executive Board decision 96/15 on the allocation of UNFPA resources.